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Date/Time: March 9, 2005

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TO
Examiner Michael Trettel
Art Group 3673

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MAIL STOP AMENDMENT

Faxed: 09 March 2005

Applicant: Allen, et al.

Serial No.: 10/770,721

Title: HOSPITAL BED AND MATTRESS HAVING A RETRACTABLE
FOOT SECTION

Filed: February 3, 2004

Atty. No.: 8266-1208

- ☒ Transmittal w/ Certification Under 37 C.F.R. § 1.8(a) (in duplicate);
☒ Petition Extension of Time w/ Certification Under 37 C.F.R. § 1.8(a) (in duplicate); and
☒ Response to Office Action w/ Certification Under 37 C.F.R. § 1.8(a).

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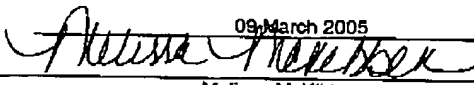
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BOSE MCKINNEY & EVANS LLP**CUSTOMER NUMBER 25267**2700 First Indiana Plaza
135 North Pennsylvania Street
Indianapolis, Indiana 46204**PATENT APPLICATION**

Applicant: Allen, E. David et al.
 Serial No.: 10/770,721
 Filing Date: February 3, 2004
 Title: HOSPITAL BED AND MATTRESS HAVING
 A RETRACTABLE FOOT SECTION
 Group: 3673 Examiner: M. Trettel
 Atty. Docket: 8266-1208

Certificate Under 37 C.F.R. 1.8(a)	
I hereby certify that this paper or correspondence is being transmitted <i>via facsimile</i> to (703) 872-9306 at the United States Patent and Trademark Office, Alexandria, Virginia 22313-1450.	
on	09 March 2005
	
Melissa McKibben	
Dated:	09 March 2005

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a response in the above-identified application:


The fee has been calculated as shown below:

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS (37 C.F.R. 1.16(c))	18	20	0	\$50	\$0
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	3	3	0	\$200	\$0
If applicant has small entity status under 37 C.F.R. 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL	NO	\$0
TOTAL FEE FOR ADDITIONAL CLAIMS					\$0

*If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.
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<input checked="" type="checkbox"/>	An Extension of Time for 1 month(s) is hereby requested under 37 C.F.R. 1.136(a). The required fee for filing this extension is:	\$120.00
<input type="checkbox"/>	Information Disclosure Statement	
TOTAL FEE FOR THIS AMENDMENT		\$120.00
<input checked="" type="checkbox"/>	Please charge Deposit Account No. 02-3223 the \$120.00 fee.	

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.


 Attorney of Record
 Christine E. Mayewski Orich
 Registration No.: 44,987

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